

2000 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # V19719
 1. Entity Name
 TBM ASSOCIATES, INC.

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 00 OCT 23 AM 9:21

Principal Place of Business Mailing Address
 400 N. OCEAN DRIVE 400 N. OCEAN DRIVE
 #102 #102
 SINGER ISLAND, FL 33404 SINGER ISLAND, FL 33404

2. Principal Place of Business 3. Mailing Address
 3576 JONATHAN'S HARBOUR DR 3576 JONATHAN'S HARBOUR DR
 Suite, Apt. #, etc. Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State City & State
 JUPITER, FL JUPITER, FL
 Zip Country Zip Country
 33477 US 33477 US

4. FEI Number Applied For
 65-0315089 Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 LAWLER, DONNA G.
 400 N. OCEAN DRIVE, #102
 SINGER ISLAND, FL 33404

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 3576 Jonathan's Harbour Drive
 City Jupiter FL Zip Code 33477

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW IN FEES \$150.00
 After MAY 1, 2000 Fee will be \$250.00
 Make Checks Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS LAWLER, DONNA G. 400 N. Ocean Drive, #102 Singer Island, FL 33404 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 3576 Jonathan's Harbour Drive Jupiter, FL 33477
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 600003456006--4 -11/07/00--01116--009 ****150.00 ****150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* 10-20-00 (54) 748-3404
Signature and Typed or Printed Name of Signing Officer or Director Date Daytime Phone #

CR2E034 (9/99)

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SMYTH & HAUCK, P.A.

CERTIFIED PUBLIC ACCOUNTANTS

Paul F. Smyth, CPA*
Darby M. Hauck, CPA*

William H. Hines, CPA*
Wanda W. Bergeron, CPA*
Jane E. Gravelle, CPA*
Lynn W. Evans, CPA (GA only)

Members
American Institute of
Certified Public Accountants
Florida Institute of
Certified Public Accountants

* Regulated by the State of FL

October 18, 2000

Department of State
Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: TBM Associates, Inc.
FEI #65-0315089

Dear Sir or Madam:

Enclosed please find the above client's 2000 Uniform Business Report (UBR) with their check in the amount of \$150.00. Also enclosed is a copy of the Application for Reinstatement which this client received.

Please be advised that they did not receive your first or second notices, and the first time they were advised that their corporate status was in jeopardy was when they received the Reinstatement Application.

We respectfully request that you accept their check for \$150.00 as timely filing for their UBR and do not dissolve or revoke their corporate status.

Thank you for your attention to this matter.

Sincerely,

SMYTH & HAUCK, P.A.

Paul F. Smyth
Certified Public Accountant

PFS/sdp
Enc.
Users/Sharon/Word/PFS-UBR ltr 10-18-00